	PATEN	FAPPLICAT Effe	TON FEE ective Oct			ION REC	ORD	A	Application	on or I	Docket Nu	mber
				S FILED - PART (Column 1)		umn 2)	SMAL TYPE	L E	ENTITY		OTHER THAN SMALL ENTITY	
7	TOTAL CLAIMS			NUMBER FILED		NUMBER EXTRA		E.	FEE		RATE	FEE
F	OR	NUMBE	FEE					<del> </del>	OF		- <del> </del>	
TOTAL CHARGEABLE CLAIMS			n	minus 20=		*		9=			1	-
INDEPENDENT CLAIMS				minus 3 =		*		٠.		OR	<del></del>	<del> </del>
М	JLTIPLE DEPE	ENDENT CLAIM	PRESENT			П	X42	=	<u> </u>	OR	X84=	ļ
٠١٠	the difference	o in column 1	io logo the		#ö# :	·	+140	)=		OR	+280=	·
•	Λ	e in column 1 i				column 2	TOTA	AL		OR	TOTAL	
	A '	CLAIMS AS (Column 1)		D - PAR (Colun		(Column 3)	SMA	l f.∙ <b>F</b>	NTITY	OR		THAN ENTITY
\ \ !		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA	RATI	٦	ADDI- TIONAL FEE	7	RATE	ADDI- TIONAL
j	Total	. 28	Minus	** ~	28	=	X\$ 9		<u> </u>		X\$18=	FEE
	Independent	. 8	Minus	***	Ĭ	=	X42=	-	,	OR		<u> </u>
	FIRST PRES	ENTATION OF N	MULTIPLE DE	PENDENT	CLAIM		A42=	-		OR	X84=	
							+140=			OR	+280≃	
							TOT ADDIT. FI			OŖ,	TOTAL ODIT, FEE	
7	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST											
		REMAINING AFTER AMENDMENT		PREVIOU PAID F	JSLY	PRESENT EXTRA	RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
1	Total	* 7	Minus	** 2	0		X\$ 9=			OR	X\$18=	
L	Independent	* / NTATION OF M	Minus	***	3	=	X42=	7		OR	X84=	
1	WOTT TREAT	NATION OF M	OLTIPLE DE	PENDENT	LAIM		+140=	1		OR	+280-	
							TOTA ADDIT. FE			OR A	<u>TOTAL</u> DDIT. FEE	$\Rightarrow$
		(Column 1)		(Columr		(Column 3)					0011.1 22	
是法學學		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	RATE	TI	ADDI- ONAL FEE		RATE	ADDI- TIONAL FEE
7	otal	*	Minus	**	1	=	X\$ 9=	1		OR	X\$18=	
		*	Minus	***		=	X42=	+		·		
F —	IRST PRESEN	NTATION OF MU	JLTIPLE DEF	PENDENT C	LAIM		/172=			OR	X84=	
íth	e entry in colum	n t is less than the	e entry in colu	nn 2 write "o	'in colo	mp 2	+140=		(	OR	+280=	I
ı u	ie Highest Num	ber Previously Pai	id For" IN THIS	S SPACE is le	ss than	20. enter "20."	TOTAL ADDIT. FEE			OR AD	TOTAL DIT. FEE	
Γhe	"Highest Numb	ber Previously Pa er Previously Paid	I For" (Total or	o SPACE is le Independent)	ss than is the h	ਤ, enter "3." ighest number f			riale box i			

## BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

884. Saausi

_			ł	00	7	JAAU	21					
_		CLAIMS A	- <b>PART</b> in 1)	I SMAL (Column 2) TYPE				NTITY		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			38					RATE		OR -		ENTITY
FOR									FEE	_	RATE	FEE
-			NUMBER FILED		NUMBER EXTRA		BAS	C FEE	355.00	OR	BASIC FEE	710.00
		ABLE CLAIMS	3 minus 20=		. 8		X	9=		OR	X\$18=	144
┣—	DEPENDENT C			ninus 3 =			X40=			7	X80=	80
М	ULTIPLE DEPE 	NDENT CLAIM P	RESENT						<del></del> -	OR	7.00=	00
*	f the difference	e in column 1 is	less than zero, enter "0" in column 2				<u> </u>	35=		OR	L	(10)
CLAIMS AS AMENDED - PART II							TO	ΓAL	L	OR	TOTAL	434
	•	(Column 1)								OTHER THAN OR SMALL ENTITY		
		CLAIMS		(Colur HIGH		SM	SMALL ENTITY			SMALL	ENTITY	
<b>AMENDMENT A</b>		REMAINING AFTER AMENDMENT		NUME PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	·	=	X\$	9=		OR	X\$18=	
	Independent FIRST PRESE	* ENTATION OF MI	Minus	PENDENT	CI AINA	=	X40	)=		OR	X80=	·
	-		OZITI EL DE	PENDENT	CLAIM							
+135= OR +270=												
							ADDIT.	TAL FFF		OR	TOTAL ADDIT. FEE	
<u>-</u>		(Column 1)		(Colum		(Column 3)				• ′	ADDIT. I CE	
AMENDMENT B	Tabel	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total Independent	*	Minus Minus	**		=	X\$ 9	)=		OR	X\$18=	
¥		L" NTATION OF MU	L.	PENDENT	CI AIM	[=	X40	=		OR	X80=	
							+135			OR	+270=	
							TO ADDIT. I	TAL EE		OR	TOTAL DDIT. FEE	
-		(Column 1)		(Colum	n 2)	(Column 3)				•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ST ER JSLY	PRESENT EXTRA	RAT		ADDI- TIONAL FEE		RATE	ADDI- ' TIONAL FEE
	Total		Minus	**		=	X\$ 9	=		OR	X\$18=	7
	Independent		Minus	***		=	Y40	+		~``F		
	HIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (	CLAIM		X40=	4		OR	X80=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										,		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												